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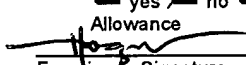
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APPLICANTS  
  
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\*\* CONTINUING DATA \*\*\*\*\*  
 NONE HN

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 NONE HN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance  Examiner's Signature	STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
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TITLE  
 Dual Band Sleeve Antenna

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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